PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

8515158

		CL AIMS A	S EII ED	DART				•					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OI			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			15					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.0	0 OR	BASIC FEI		
T	OTAL CHARGE	ABLE CLAIMS	\S minus 20=		•			X\$ 9=		OR	X\$18=	1	
IN	DEPENDENT (CLAIMS	₹ minus 3 =		•			X43=		7	V06		
MULTIPLE DEPENDENT CLAIM PRESE									+	OR		 	
* If the difference in column 1 is less than zero, enter "0" in column						column 2	' I	+145=	 	OR	L	·	
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	770	
		(Column 1)		(Colum		(Column 3)	SMALL ENTITY			OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* ENTATION OF M	Minus			=		X43=		OR	X86=		
	TINOT FALSE	ENTATION OF MI	DETIPLE DE	PENDENT	CLAIM			+145=		OR	+290=		
							L	TOTAL		- L	TOTAL		
		(Column 1)		(Colum	n 3).	(Column 2)	Ą	DDIT. FEE		JOR ,	ADDIT. FEE		
		CLAIMS		HIGHE		(Column 3)	_			, ,			
AMENDMENT B	···	REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	JSLY _.	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	F	X43=		1 1	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT C	LAIM		┢			OR			
								+145=		OR	+290=		
		•					AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE		
	·	(Column 1)		(Column	·2)	(Column 3)	٠.	•	•				
ן נ	•	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOUS PAID FO	R SLÝ	PRESENT EXTRA	İ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMEN!	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	1 6 6	
	ndependent		Minus	***		=	一	X43=					
<u>`</u>	FIRST PRESE	VTATION OF MU	LTIPLE DEP	ENDENT C	LAIM		F	A43=		OR _	X86=		
• If 1	he entry in colum	nn 1 is less than the	entry in colum		'in acl		L	145=		OR	+290=	· 	
11	ine mignest Nur	nber Previously Pain nber Previously Pain	d For IN THIS	SPACE is to	ce than	20 00104 *20 *	ADI	TOTAL DIT. FEE	• • • • •	OR AL	TOTAL DDIT, FEE		
		I CTIOUSIY Fall	סוות ותויייים ייייי	STAUL IS IE	ss man	3, enter "3." ighest number f		. —					